

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.



L. Bolling, Captain
Kilby Correctional Facility
P.O. Box 150
Mt. Meigs, AL 36057

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Tollman*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Tollman

C. Date of Delivery

10/05/07

address different from item 1? ☐ Yes
enter delivery address below: ☐ No

☒ Certified Mail

☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 1490 0000 0024 8127

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.



Leon Moore, C.O.I.
Kilby Correctional Facility
P.O. Box 150
Mt. Meigs, AL 36057

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Tollman*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Tollman

C. Date of Delivery

10/05/07

any address different from item 1? ☐ Yes
enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article

(Transfer from service label)

7007 1490 0000 0024 8165

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front.

1. Article Address



Leon Varner
Kilby Correctional Facility
P.O. Box 150
Mt. Meigs, AL 36057

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Tollman*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Tollman

C. Date of Delivery

10/05/07

any address different from item 1? ☐ Yes
enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 1490 0000 0024 8134

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.

Arnold Holt
Kilby Correctional Facility
P.O. Box 150
Mt. Meigs, AL 36057

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Todd Hankus*☐ Agent☐ Addressee

B. Received by (Printed Name)

Todd Hankus

C. Date of Delivery

*10/05/07*very address different from item 1? ☐ Yes, enter delivery address below: ☐ No

07CV884
PO + CMP

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 1490 0000 0024 8158

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.

Leon Varner, Steward II
Kilby Correctional Facility
P.O. Box 150
Mt. Meigs, AL 36057

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Todd Hankus*☐ Agent☐ Addressee

d by (Printed Name)

Todd Hankus

C. Date of Delivery

*10/5/07*y address different from item 1? ☐ Yesnter delivery address below: ☐ No

07CV884
PO + CMP

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece.

M.A. Warren, Chief Steward
Kilby Correctional Facility
P.O. Box 150
Mt. Meigs, AL 36057

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Todd Hankus*☐ Agent☐ Addressee

B. Received by (Printed Name)

Todd Hankus

C. Date of Delivery

*10/05/07*y address different from item 1? ☐ Yesnter delivery address below: ☐ No

07CV884
PO + CMP

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 1490 0000 0024 8110

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540